Docket Number 19226/2282 (R-5782) ION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) In re Application of Swihart et al. CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with Filed March 9, 2004 Application Number 10/796,442 sufficient postage for first class mail in an envelope For PROCESS FOR PREPARING LUMINESCENT SILICON addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-NANOPARTICLES Group Art Unit 2891 Examiner A. Sarkar This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \square Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$ 510 Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) ☐ Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \square Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) Applicant claims small entity status. A check to cover the fee is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 14-1138 I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) Signature (585) 263-1304 Michael L. Goldman

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Telephone Number

☐ Total of

_ forms are submitted.

Typed or printed name

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